PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

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	•••					
	COMPLETE IF KNOWN					
Application Number	1					
Filing Date						
Group Art Unit						
Examiner Name		J				
	First Named Inventor COMPL Application Number Filing Date Group Art Unit	First Named Inventor COMPLETE IF KNOWN Application Number / Filing Date Group Art Unit				

As a below named inv	ventor, I hereby declare th	nat:							
My residence, post offic	ce address, and citizenship	are as stated below next	to my name.						
I believe I am the original, are listed below) of the sub	first and sole inventor (if only or bject matter which is claimed an	ne name is listed below) or ar nd for which a patent is sough	n original, first and j	joint inventor (if plu	ral names				
are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: LIGHT INVARIANT FACE RECOGNITION									
the specification of which	(Title of t	he Invention)							
is attached hereto	•	70 m. o. m. o ,							
OR									
was filed on (MM/DD)/YYY)	as United States Ap	oplication Number c	or PCT Internationa	ıJ				
Application Number	and	was amended on (MM/DD/Y	YYY) [(if	f applicable).				
I hereby state that I have revie specifically referred to above.	ewed and understand the conte								
applications, material internal	close information which is mater tion which became available be continuation-in-part application.	Piween the tiling date of the or	I in 37 CFR 1.56, in rior application and	icluding for continu the national or PC	ation-in-part T				
States of America, listed below	benefits under 35 U.S.C. 119(a or 365(a) of any PCT internat w and have also identified belo or of any PCT international ap	tional application which desig	gnated at least one	country other than	the United				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy	Attached?				
-	-		 						
			L		Ц				
Additional foreign application	tion numbers are listed on a sup	pplemental priority data sheet	PTO/SB/02B attac	ched hereto:					

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	ondence to: Customer Number or Bar Code Label		*24737	24737* OR			Correspondance address below
Philips Intellectual Property & Standa	ards						v
Name							•
P.O. Box 3001		<u> </u>					
Address							
Briarcliff Manor		NY				105	10-8001
City		State				ZIP	
U.S.A.			(914)33	2-0222			(914) 332-0615
Country			Teleph	one			Fax
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST	INVENTOR:	A pe	tition has	been f	filed fo	r this	s unsigned inventor
Given Name (first and middle [if any])			ily Nam urname		RAJK	OVIC	
Inventor's Signature Supported	Majkel	et			Date	12	2/30/03
STOLBERG	•	NY		USA			YU
Residence: City		State		Coun	try		Citizenship
5105 TOWNEHOUSE DRIVE							
Mailing Address							_
CORAM		NEW YOR	₹K	11727	•		USA
City		State		Zip			Country
NAME OF SECOND INVENT	ron: Ap	etition has	been file	d for th	is unsi	gne	d inventor
Given Name SR (first and middle [if any])	RINIVAS			ily Nam urname		JITA	
Inventor's Signature					Date		
EINDHOVEN				NL			IN
Residence: City		State		Count	trv		Citizenship
PENELOPE STRAAT 227							
Mailing Address							
EINDHOVEN				5631			NETHERLANDS
City		State				ļ	
		Jiale		Zip			Country
Additional inventors are being	g named on the	_ supplement	tal Additiona	al Invento	or(s) she	et(s) l	PTO/SB/02A attached hereto.

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US020626 **DECLARATION**

ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>

Name of Additional Joint Inventor, if any:		A petition has been filed for this unsigned inventor						
Given Name (first and midd	fle [if any])		Fa	amily	Name or Surname			
VASANTH		F	PHILOMIN					
Inventor's Signature					Date			
Residence: City STOLBERG	State	Co	GERMANY		IN Citizenship			
Mailing Address AUF DER HOEHE	9							
Mailing Address								
City STOLBERG	_State	ZIP	52223	Co	GERMANY			
Name of Additional Joint Inventor, if any:		☐ A petition has been filed for this unsigned inventor						
Given Name (first and midd	le [if any])		Family Name or Surname					
		L						
Inventor's Signature					Date			
Residence: City	State	Cou	untry		Citizenship			
Mailing Address								
Mailing Address								
City	State	Zip		Cou	untry			
Name of Additional Joint Inventor, if any:			A petition has been filed					
Given Name (first and middl	e [if any])		Family Name or Surname					
		L						
Inventor's Signature					Date			
Residence: City	State	Cou	intry		Citizenship			
Mailing Address								
Mailing Address								
City	State	State Zip			Country			

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DECLARA-		N FOR UTILITY OR	Attorney Docket Number First Named Inventor	US020626 Miroslav Trajkovic et al	_			
PATENT APPLICATION			COMPLETE IF KNOWN					
(37 CFR 1.63) ⊠Declaration □Declaration Submitted OR Submitted after Initial		Application Number	1					
		☐Declaration Submitted after Initial	Filing Date					
With Initial Filing	Filing (surcharge (37 CFR 1.16 (e))	Group Art Unit						
		required)	Examiner Name		J			

As a below named inv	As a below named inventor, I hereby declare that:								
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
LIGHT INVARIANT FACE RECOGNITION									
the specification of which	(Title of t)	he Invention)							
is attached hereto	(*****	io inversion,							
OR									
was filed on (MM/DD	(YYYY)	as United States Ap	pplication Number o	or PCT International					
Application Number	and	was amended on (MM/DD/Y	YYY)	(if	applicable).				
I hereby state that I have revie specifically referred to above.	ewed and understand the conte	ents of the above identified sp	ecification, including						
opplications, material implifial	close information which is mater ion which became available be continuation-in-part application.	iveen the tiling date of the or	l in 37 CFR 1.56, in ior application and	ncluding for continua the national or PCT	ition-in-part				
States of America, listed below	benefits under 35 U.S.C. 119(a or 365(a) of any PCT internati w and have also identified belov or of any PCT international ap	ional application which desig	nated at least one	country other than	the United				
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority	Certified Copy	Attached?				
	Country	(WiW/DD/TTTT) Country	Not Claimed	YES	NO				
	i								
İ									
Additional foreign applicati	on numbers are listed on a sur	nlemental priority data shoot	DTO/SB/02B avec						

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

mer Number Code Label			OR	Correspondance address below		
						
NY				10510-8001		
State				ZIP		
	(914)33	2-0222		(914) 332-0615		
				Fax		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.						
OR: A	etition has	been file	ed for	this unsigned inventor		
			TR	AJKOVIC		
			Date			
NY		USA		YU		
State		Country	y	Citizenship		
NEW YO	ORK	11727		USA		
State		Zip		Country		
A petition ha	ıs been file	d for this	unsig	gned inventor		
			GU	ITA		
			Date	Jan. 8th 2004		
		NL		IN		
State		Country	,	Citizenship		
		5631		NETHERLANDS		
State				Country		
	ental Additions		s) shee			
	NY State Of my own knowledge ents were made with r 18 U.S.C. 1001 and OR: NY State NEW YOUNG State A petition has state State	NY State (914)33 Teleph of my own knowledge are true and ents were made with the knowledge or 18 U.S.C. 1001 and that such will OR: A petition has Fam or S NY State NEW YORK State A petition has been file Fam or S State State	NY State (914)332-0222 Telephone of my own knowledge are true and that all state and the knowledge that willful rise state or Surname NY State A petition has been file Family Name or Surname NY State NEW YORK State In A petition has been filed for this Family Name or Surname NEW YORK State NEW YORK State NEW YORK State NEW YORK State NL Country State NY State (914)332-0222 Telephone of my own knowledge are true and that all statement ents were made with the knowledge that willful false statement and the statement of the s			

Please type a plus sign (+) inside this box

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US020626 **DECLARATION**

ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>

Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor							
Given Name (first and midd	fle [if any])			Fa	amily	Name or Surname		
VASANTH		Р	HILOMIN					
Inventor's Signature						Date		
Residence: City STOLBERG	State	Cou	intry	GERMANY		IN Citizenship		
Mailing Address AUF DER HOEHE	9							
Mailing Address								
City STOLBERG	State	ZIP	5222	23	Cot	GERMANY		
Name of Additional Joint Inventor, if any:			A petition	has been filed		his unsigned inventor		
Given Name (first and midd	le [if any])		Family Name or Sumame					
		丄						
Inventor's Signature						Date		
Residence: City	State	Cou	ntry			Citizenship		
Malling Address			-					
Mailing Address								
City	State	Zip	,,,		Cou	intry		
Name of Additional Joint Inventor, if any:			☐ A petition has been filed for this unsigned inventor					
Given Name (first and middl	e [if any])		Family Name or Surname					
Inventor's Signature						Date		
Residence: City	State	Cour	ntry		Citizenship			
Mailing Address					•			
Mailing Address								
City	State Zip C				Col	untry		

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PTO/SB/01 (03-01)

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DECLARATION FOR UTILITY OR		Attorney Docket Number	r US020626					
DESIGN			First Named Inventor	Miroslav Trajkovic et al				
PATENT APPLICATION		COMP	COMPLETE IF KNOWN					
(37 CFR 1.63)	Application Number	1						
With Initial Filing (surcharge	Submitted after Initial	Filing Date						
		Filing (surcharge (37 CFR 1.16 (e))	Group Art Unit					
-								

Examiner Name

required)

As a below named inv	As a below named inventor, I hereby declare that:								
My residence, post office address, and citizenship are as stated below next to my name.									
			•						
are listed below) of the sub	first and sole inventor (if only or ject matter which is claimed an	id for which a patent is sough	n original, first and j t on the invention e	oint inventor (if plu ntitled:	ral names				
LIGHT INVARIANT FACE RECOGNITION									
the specification of which	(Title of th	he Invention)							
is attached hereto									
OR was filed on (MM/DD)	22222								
was filed on (MM/DD	// / / / / / / / / / / / / / / / / / / /	as United States Ap	plication Number o	r PCT Internationa	ıl				
Application Number	, and	was amended on (MM/DD/Y	YYY)	(ii	f applicable).				
I hereby state that I have revie specifically referred to above.	ewed and understand the conte	ents of the above identified sp	ecification, includin	g the claims as an	nended				
acknowledge the duty to disc	close information which is mate	rial to patentability as defined	in 37 CFR 1.56, in	cluding for continu	ation-in-part				
applications, material injulinat	tion which became available be continuation-in-part application.	erween the tiling date of the or	ior application and	the national or PC	T				
I hereby claim foreign priority	benefits under 35 U.S.C. 119(a	a)-(d) or (f), or 365(b) of any fo	oreign application(s	a) for patent, inven	tor's or plant				
States of America, listed below	wand have also identified below	tional application which desig	nated at least one	country other than	n the United				
breeder's rights certificate(s), claimed.	or of any PCT international ap	plication having a filing date	before that of the	application on whi	ch priority is				
Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy	Attached?				
Number(s)	Country	(MM/DD/YYYY) Country	Not Claimed	YES	NO				
Additional foreign applicati	ion numbers are listed on a sur	polemental priority data sheet	PTO/SB/02B attac	hed hereto:					

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Numb or Bar Code Lab	per Del	*24737*		OR	? [Correspondance address below	
Philips Intellectual Property & Standards							
Name							
P.O. Box 3001						•	
Address							
Briarcliff Manor	NY				10510	0-8001	
City	State				ZIP		
U.S.A.		(914)33	2-0222		(1	(914) 332-0615	
Country		Teleph				Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:	A petif	tion has	been f	iled for	this	unsigned inventor	
Given Name MIROSLAV (first and middle [if any])			ily Nam urname		RAJKC	OVIC	
Inventor's Signature				Date			
STOLBERG	NY		USA			YU	
Residence: City	State		Count	try		Citizenship	
5105 TOWNEHOUSE DRIVE							
Mailing Address						(
CORAM	NEW YORK	K	11727			USA	
City	State		Zip			Country	
NAME OF SECOND INVENTOR: A p	petition has b	een file		is unsig	aned		
Given Name SRINIVAS (first and middle [if any])		Fami	ily Name	e GU	JITA		
Inventor's Signature				Date			
EINDHOVEN			NL		\Box	IN	
Residence: City	State	1	Count	irv		Citizenship	
PENELOPE STRAAT 227				<u></u>			
Mailing Address							
EINDHOVEN			5631			NETHERLANDS	
City	State		Zip			Country	
Additional inventors are being named on the		· Addition		-/-\ aba			
Additional inventors are being named on the	Supplementar	Additions	al invento	ır(s) snee	3t(S) ►	PTO/SB/02A attached hereto.	

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US020626 **DECLARATION**

ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>

Name of Additional Joint Inventor, if any:					
The street of th		L	A petition has been	filed	for this unsigned inventor
Given Name (first and middl	e [if any])	4	Fa	amily	Name or Surname
VASANTH		F	PHILOMIN		
Inventor's Signature					Date 01-08-2004
Residence: City STOLBERG	State	Co	GERMANY		IN Citizenship
Mailing Address AUF DER HOEHE 9)				
Mailing Address					
	State	ZIP	52223	Со	GERMANY
Name of Additional Joint Inventor, if any:			A petition has been filed		
Given Name (first and middle	e [if any])	I	Family Name or Surname		
		\bot			
Inventor's Signature					Date
Residence: City	State	Coi	untry		Citizenship
Mailing Address					Ottazenomp
Mailing Address					
City	tate	Zip		Cor	ıntry
Name of Additional Joint Inventor, if any:			A petition has been filed		
Given Name (first and middle	[if any])	T	Family Name or Sumame		
		1			varie di demane
Inventor's Signature					5.4
Residence: City	State Country Citizenship				
Mailing Address	T Canada		muy		Citizenship
Malling Address					
City	State		Zip	Co	untry

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